

WHAT IS ASSESSMENT?

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Since World War II the term "assessment" has become increasingly popular both among psychologists and persons who use psychological services. However, there is much confusion about the meaning of the word. Some psychologists use it as a synonym for personality appraisal; others use it as a substitute term for clinical psychology; and still others use it to mean any sort of analysis, however fragmentary, of human abilities and achievements. The word assessment needs to be clarified and defined.

In this chapter I shall try to make clear what assessment is and what assessment is not.

Let us ask ourselves some questions which the layman asks of the assessment psychologist when he is trying to find out what assessment is.

1. Is assessment the same as testing?

During the past fifty years, psychologists have devised thousands of tests for hundreds of human traits and characteristics, such as reaction time, sensori-muscular coordination, intelligence,

emotions, personality, temperament, and social maturity (1). Some of these tests, such as the Binet test for the measurement of intelligence, have been repeatedly revised and improved so that today they constitute exceedingly fine tools for the measurement of certain limited aspects of behavior. A personnel or clinical psychologist is usually familiar with and adept in the administration and interpretation of such tests.

Many schools and industries have "testing programs". In such programs an assistant to a psychologist will generally give the tests to large groups of people and then score the tests by objective scoring keys. Such testing programs require that the assistant who gives the tests be a college graduate with an A. B. degree in psychology, but it is not required that this assistant be a professionally trained psychologist. No very great abilities are involved in the orderly administration and scoring of objective-type psychological tests. Also, objective-type tests alone cannot give a complete picture of any human being's traits and characteristics. No, assessment is not the same as testing. In assessing a human being, a psychologist will use all the psychological

(1) There is not yet available in psychology a complete bibliography of all the many tests. For a partial bibliographic introduction see:

a. A Manual of Individual Tests and Testing by Bronner, A. F., Healy, W., Lowe, G. M., and Shimberg, M. E.; Little Brown and Co.; 1932, Boston, Pp. 287.

b. A Bibliography of Mental Tests and Rating Scales (1939, Pp. 295) and A Bibliography of Mental Tests and Rating Scales (1945 Supplement, Pp. 86) by Hildreth, G. H.; The Psychological Corporation, New York, New York.

c. The Mental Measurements Yearbook by Buros, O. K.; Mental Measurements Yearbook, Highland Park, New Jersey; 1948, Pp. 1047.

tools that are relevant. Assessment involves testing, and objective-type testing is indispensable in assessment, but assessment is more than testing.

2. Is assessment the same as psychiatry?

Psychiatry is a branch of medicine which deals with the morbid or pathological manifestations of the human mind. A psychiatrist is usually associated with a mental institution in the care and treatment of psychotics. In popular terminology, a psychotic is a crazy person. A psychotic, in his most extreme form, is so mentally unbalanced that he requires custodial supervision and treatment. Some of the more common types of psychotics are the schizophrenics, the manic-depressives, the deteriorating epileptics, the general paretics, and the chronic alcoholics. Assessment is not the same as psychiatry. Psychiatry deals with the abnormal. Assessment, so far, has been restricted to normal persons, although in some assessment programs psychiatrists have been used to help identify psychotics and their cousins, the psychopaths.

3. Is assessment the same as psychoanalysis?

Psychoanalysis, a branch of psychiatry, is a form of therapy for emotional disturbances which has been found to be of some use in the treatment of hysterics and persons suffering from anxiety neuroses. Professor Pierre Janet, the distinguished French psychologist, claimed that Dr. Sigmund Freud, the Viennese neurologist who founded psychoanalysis, plagiarized Janet's ideas of psychological analysis and called

them his own (2).

Psychoanalysis is an expensive and long drawn out process. The patient must see the psychoanalyst two or three times a week for a period of from one to two years or more. At each session the patient reclines on a couch and talks about anything and everything he wishes or which the psychoanalyst encourages him to talk about. In this way the psychoanalyst attempts to unravel the complicated emotional strands of the patient's life.

Scientific psychologists are not too enthusiastic about the claims of psychoanalysts (3). The statistics indicate that psychoanalysis is of some value in the treatment of hysterical and neurotic patients and with persons suffering from minor character disorders. But these results are not better than those from other methods of treatment, and psychoanalysis has proved unsuccessful in the treatment of psychotics. There is always the possibility in psychoanalytic treatment that the patient, over such

(2) Breuer and Freud "changed a word here and there in their psychological descriptions. They spoke of 'psychoanalysis' where I had spoken of 'psychological analysis.' They invented the name 'complex' whereas I had used the term 'psychological system' to denote the totality of psychological phenomena and the movements whether of the limbs or of the internal organs which were associated to constitute the traumatic memory. They spoke of 'catharsis' where I had spoken of the 'dissociation of fixed ideas' or of 'moral disinfection.' The names differed, but the essential ideas I had put forward, even those which were still subject to discussion (like that of the psychological system), were accepted without modification. Down to this very day, if we disregard hazardous speculations and confine our attention to the accounts of traumatic memories published by Freud's pupils, we shall find descriptions closely akin to those which I published long ago. When we consider these primary doctrines and these cases of traumatic memory, we find it difficult to understand how it is that psychoanalysis can be supposed to differ so much from psychological analysis, and difficult to discern the novelty of the psychoanalytical contribution to psychiatry."

Psychological Healing by Janet, Pierre, Vol. 1, Pp. 601-602, The Macmillan Co., New York, 1925.

(3) Textbook of Abnormal Psychology by Landis, C., and Bolles, R. H., Pp. 519-523, The Macmillan Co., New York, 1947, Pp. 546.

a long period of time, could have gotten better by himself without any help whatsoever from the psychoanalyst. Psychoanalysts have not yet been able to offer any conclusive evidence to show that the beneficial effects of psychoanalysis are at all permanent.

Psychoanalysis may be defined as an expensive investigation of the patient's mind to uncover the emotional factors responsible for the psychological disturbances. In most instances psychoanalysis uses mystical and ambiguous concepts which elude scientific verification. Of those psychoanalytic claims and concepts which have been subjected to objective scrutiny, most have been found wanting in evidence to support them, although a few have been verified (4). Psychoanalysis is not the same as assessment, although assessment employs some of the principles and procedures developed by Janet and other psychologists from whom Freud borrowed in his development of psychoanalysis. But assessment is not psychoanalysis, as psychoanalysis is commonly interpreted.

4. Is assessment the same as clinical psychology?

A generation ago scientific psychologists (i.e. experimental and animal psychologists) believed it was beneath their dignity to

(4) Millions of words have been written about psychoanalysis and its founder, Sigmund Freud. For a sympathetic biography of Freud by one of his closest disciples, read Freud, Master and Friend by Sachs, Hanns; Harvard University Press, Cambridge, Massachusetts, 1944; Pp. 195. For a critical analysis of psychoanalysis by a psychiatrist, read Wish-Hunting in the Unconscious by Harrington, M.; the Macmillan Co., New York, 1934, Pp. 189. Emil Ludwig, in his Dr. Freud, (published by Hellman, Williams, and Co., New York, 1947; Pp. 317) is most hostile and sometimes vitriolic to both Freud and psychoanalysis. For a comprehensively factual and scholarly analysis of the scientific validity of Freudian concepts, see Survey of Objective Studies of Psychoanalytic Concepts by Sears, R. R., Social Science Research Council, 230 Park Avenue, New York, 1942, Pp. 156. For a modern exposition of psychoanalysis by a prominent American psychoanalyst, see Fundamentals of Psychoanalysis by Alexander, F. W. W. Norton and Co., New York, 1948, Pp. 312.

ness around with human beings. The last thing they wanted to do was to study human beings as such. Measure the amplitude of the knee jerk, photograph that eye movement, condition reflex his visual purple, but for goodness sakes, leave that mind alone, especially when that mind belongs to a human being who lives in a complex social environment. Men who wanted to study individual human lives were looked upon as possibly incompetent but certainly odd fellows. The leading experimental psychologist of a generation ago referred to the leading clinical psychologist as "the best of a poor lot" and when it was suggested to him that the clinical psychologist be invited to participate in one of his seminars on learning, he asked haughtily, "Would you take a sandwich to a banquet?"

But now the situation has changed. Academicians who were once proud to be called "apparatus men" are now resentful when they are labeled "tin horn psychologists" - and they are quick to point out that they are, after all, clinical psychologists too - even tho' their claims are generally not supported by formal training or supervised experience in clinical psychology. Psychology swarms with clinical psychologists, so-called. Some of them are entitled to wear the purple, but there are entirely too many academicians, counselors, text book writers, Rorschach-TAT projectionists, uh-huh therapists, and half-breed psychoanalysts, who call themselves clinical psychologists, but who are, in that respect, charlatans. Anyway, it is a healthy sign when even university psychologists are beginning to realize the importance of making careful studies

of individual human lives.

I have gone to considerable length to show that clinical psychology has been watered and contaminated. In the best sense of the term, a clinical psychologist, like a family physician, is a boon to humanity. The clinical psychologist is essentially a psychological physician. His purpose is to help his patient to a better life adjustment by means of careful diagnosis and proper guidance. The clinical psychologist must be extremely skillful in person-to-person relationships and always be able to identify himself with the patient and to understand his patient's point of view. The patient is his concern. If he fails to help the patient to a better life adjustment, usually through the development of new habits, he fails in his professional purpose just as the physician fails who does not cure his patient of a bodily illness. For the most part the clinical psychologist deals with more or less emotionally and mentally normal persons, leaving psychopaths and psychotics to the care of psychiatrists.

Assessment psychology has borrowed very heavily from clinical psychology. Well-trained clinical psychologists who are also thoroughly grounded in scientific procedures usually make excellent assessment psychologists, but assessment psychology, even tho' it has borrowed heavily from clinical psychology, is not the same as clinical psychology. Assessment psychology has developed new techniques which the clinical psychologist cannot utilize in his doctor-patient relationships because he does not have the time, the necessary resources of equipment and space, and the trained personnel to assist him. Also in clinical psychology the

patient is willing and cooperative with the psychologist in trying to find the sources of his difficulties, whereas in assessment the candidate is often a defensive and unwilling participant to the desire of the assessment psychologist to arrive at an accurate diagnosis. Assessment psychology is to clinical psychology as a New York University Medical Center is to the family physician. All assessment psychologists are clinical psychologists, but only some clinical psychologists are assessment psychologists.

BRIEF HISTORY OF ASSESSMENT

Historically, the assessment movement could be traced back to at least the days of Socrates, Plato, and Aristotle. And of course, the Bible has suggestions about ways of assessing human beings. Scientifically, assessment has its roots in experimental psychology which is usually dated to have begun in 1879, when Wilhelm Wundt founded his laboratory of psychology in Leipzig. But for all practical purposes assessment psychology began in World War II.

At the beginning of World War II the British were faced with the problem of selecting candidates for officer training in the British Forces. Since British psychology had made no important advances in applied psychology since the days of Frances Galton, they combined the German Gestalt approach to the analysis of human behavior with the psychometric and more scientific approach of the American psychologists and they added a few touches of common sense. This they called assessment. Assessment was carried out by their War Office Selection Boards (WOSB's)

which were set up not only in England but throughout the British Empire, including India, Australia, New Zealand, and Canada. The British extended and adapted their WOSB procedures to the selection of intelligence agents and saboteurs and it was from one of these assessment schools that the OSS staff borrowed the assessment ideas which were later published in the book entitled Assessment of Men (5).

In the British and OSS assessment procedures the candidates actually work and play under the same roof and in the same country-house area for a period of three to four days with the psychologists, psychiatrists, Military Testing Officers, and other trained observers. The candidate is interviewed by the psychiatrist, the psychologist, and the commanding officer of the assessment school, given psychometric and personality tests by the psychologists, and rigorously put through a series of grueling work-sample practical situations of an individual or social nature by the Military Testing Officers. During this period of time the candidate, as a member of a group of other candidates, is objectively and mercilessly observed by all persons in the assessment school while he works, while he eats, and while he plays. The purpose of this intensive observation and scientific recording of the candidate's behavior is to obtain an analysis of his motives, attitudes, work habits, personality, mentality, leadership, team spirit, and other factors in order to determine to what extent he can be expected to carry out work assignments which have been planned for him but of which the candidate is generally unaware except in the most vague way. At the end of the three or four day period of observation, testing, and interviewing, the staff members (psychologists,

(5) Assessment of Men by the OSS Assessment Staff, Rinehart and Co., 1948, New York, New York, pp. 541.

commanding officer, psychiatrists, Military Testing Officers, and others) would prepare and present individual reports of observed and recorded results and these reports would then be synthesized through a conference discussion into a final appraisal of the candidate's capabilities of carrying out his projected job assignment.

Because of the publicity given to these assessment procedures and also because it is now becoming apparent that assessment psychology is the most important practical advance made in psychology as the result of World War II, psychologists have begun using the word assessment quite freely, probably because of the prestige which it has carried since World War II. But it is necessary to point out the conditions which must be met if a psychological analysis of an individual is to be labeled assessment. These conditions are enumerated in the next section.

CONDITIONS OF ASSESSMENT

If a psychological analysis of a human being is properly to be called assessment, it must meet the following conditions:

1. The candidate's life history must be exhaustively and analytically reviewed and an individual psychological program drawn up for him in terms of his life history and projected job assignment.
2. The candidate must be given a variety of psychometric tests, including tests of intelligence, aptitude, achievement, attitudes, personality, and temperament.
3. In addition to scientific psychometric tests, the candidate must be given a variety of work-sample practical situation tests of both an individual and social nature relevant to his projected job assignment. These situation tests should include tests of "trade"

proficiency and social adaptability.

4. The candidate must be given an exhaustive series of interviews totaling more than one hour by a professional psychologist or psychiatrist.

5. Not fewer than two professional psychologists (with the help of situation testing assistants, if they are available) must participate in the observation of the candidate.

6. The assessment diagnosis (derived from the results of the review of the life history, psychometric testing, situation tests, and interviews) must be a unified staff study and not represent merely the ideas of only one of the specialists.

7. Not less than eight hours must be devoted by the candidate to the assessment process.

8. The psychologists and other trained observers must be experienced in or at least familiar with the work demands of the job or jobs for which the candidate is being assessed.

If any one of the above-named conditions is lacking, then the analysis of behavior does not merit the word assessment as a description of the process.

It now remains for us to attempt a definition of assessment which will encompass these eight conditions.

DEFINITION OF ASSESSMENT

Assessment is a combined staff analysis by psychological specialists of a person's capabilities for carrying out a projected job assignment; the assessment must include a review of the person's life history, a number of exhaustive interviews, the application of scientific psychometric tests, and the observation of the individual in situation tests, both individual and social, relevant to his projected job assignment; the candidate must devote not less than eight hours to the assessment process and the psychological specialists who are passing judgment on his capabilities must be familiar with the work demands which the candidate is expected to fulfill. In the assessment of the individual, psychological specialists take into consideration all the known and important factors related to job success, including intelligence, interests, aptitudes, motivations, social skills, trade proficiency, temperament, attitudes, and personality.

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